

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	HIDAKA et al.	Examiner:	GEMBEH, S.
Serial No.:	10/526858	Group Art Unit:	1618
Filed:	March 2, 2005	Docket:	8279.829USWO
Title:	PHARMACEUTICAL COMPOSITION AND METHOD FOR TREATING MALIGNANT TUMOR AND UTILIZATION THEREOF		

**CERTIFICATE OF TRANSMISSION**

I hereby certify that this paper is being transmitted by EFS Web to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 11 November 2009.

By: 

Name: Heidi McCarty

**SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

With regard to the above-identified application, the items of information listed on the enclosed Form SB08 are brought to the attention of the Examiner. Copies of any foreign patent documents or "Other Documents" are enclosed.

Applicants respectfully bring to the Examiner's attention that the reference listed on the enclosed Form SB08 was cited in an Office Action received in the corresponding European application. A copy of the Office Action, dated 1 October 2009, is enclosed herewith. Applicants advise that reference D1 cited in the Office Action was disclosed in the Information Disclosure Statement filed 4 May 2005. Additionally, References D2-D6 cited in the Office Action were disclosed in the Supplemental Information Disclosure Statement filed 4 December 2008.

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed (CHECK ONE):

- ☒ (1) within three (3) months of the Filing Date, before the mailing date of a First Office Action on the merits, or before the mailing date of a First Office Action on the merits after the filing of a request for continued examination under 37 C.F.R. §1.114; or

- ☐ (2) after the period defined in (1) but before the mailing date of a Final Rejection or Notice of Allowance, and
- ☐ the requisite Statement is below, OR
- ☐ the requisite fee of \$180.00 under Rule 1.17(p) is included herein, or
- ☐ (3) after the mailing date of a Final Rejection or Notice of Allowance but on or before the payment of the Issue Fee, AND the requisite Statement is below AND the requisite fee of \$180.00 under Rule 1.17(p) is included herein.

### STATEMENT

Applicants hereby state that:

- ☒ Each item of information contained in the Information Disclosure Statement was first cited in a communication from a foreign patent office in a counterpart application or by the USPTO in a related application not more than three months prior to the filing date of the Information Disclosure Statement

- ☒ If this box is checked, Applicant provides the following:

#### **Certification Under 37 C.F.R. §1.704(d)**

In accordance with 37 C.F.R. §1.704(d), the undersigned hereby certifies that each item listed on the enclosed Form SB08 was first cited in a communication from a foreign patent office in a counterpart application, and that this communication was not received by any individual designated in 37 C.F.R. §1.56(c) more than thirty (30) days prior to the filing of this Information Disclosure Statement.

- ☐ The Examiner is hereby advised of the following co-pending U.S. applications. A copy of each U.S. patent application publication (if published) or application (if not published) is enclosed.

Application No.

Filing Date

Group

No representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§ 102 and 103 and Applicants reserve the right, pursuant to 37 C.F.R. § 1.131 or otherwise, to establish that the reference(s) are not "prior art." Moreover, Applicants do not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form SB08, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

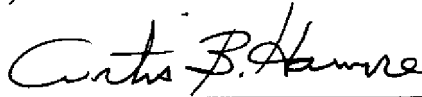
**FEE AUTHORIZATION**

Please charge any required fee or credit overpayment to Deposit Account No. 50-3478.

Respectfully submitted,

HAMRE, SCHUMANN, MUELLER &  
LARSON, P.C.  
P.O. Box 2902  
Minneapolis, MN 55402-0902  
(612) 455-3800

Dated: 11 November 2009

By:   
Curtis B. Hamre  
Reg. No. 29,165

DPM:CBH:hjm